WINTER 2018

WESTERN MICHIGAN UNIVERSITY
W Magazine

CLINICS THAT CARE

WMU faculty and student clinicians
treat thousands annually

Also inside: Students move into a retirement home

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Antique amplification

Ear trumpets are among the nearly 90 antique hearing devices exhibited at WMU's Unified Clinics. Known as the Baldwin Collection and affiliated with the hearing clinic, the exhibit is on permanent loan from Dr. Richard and Patty Baldwin. Alumnus Richard Baldwin, a former teacher of children who are hearing impaired and once the Michigan Department of Education's director of special education, began collecting the devices years ago. Most are from the 1800s. Learn more about the collection at wmich.edu/unifiedclinics/about/collection.

Dear Friends,

I can draw from countless examples to demonstrate how a Western Michigan University education improves lives. This edition of the *W Magazine* focuses on a powerful exemplar—the Unified Clinics, one of the University's health care practices that trains students and treats patients.

WMU is a trusted provider of health services for thousands in Michigan. You may be aware that the WMU Homer Stryker M.D. School of Medicine is raising up our next generation of physicians. But our health care footprint also includes the Center for Disability Services, through which students and supervising professionals offer in-home care, adult day care and community-integration services to residents who need help due to age, illness or disability. And then there is the collective of teaching clinics known as the Unified Clinics.

Together, CDS and the clinics handle some 88,000 patient appointments annually.

The Unified Clinics is a multi-specialty group practice that operates under the auspices of our College of Health and Human Services. People contending with the effects of a brain injury, vision loss, addiction, childhood trauma, developmental disorders and other challenges come seeking help.

Overseen by faculty experts, student practitioners in various degree programs—occupational therapy, blindness and low vision studies, speech-language pathology, audiology, and others—apply what they learn in the classroom to give patients research-based treatment.

A mother of one young man who suffered a severe brain injury credits the rehabilitative treatments he received at the aphasia clinic for helping him speak again.

Another family's toddler heard her parents' voices clearly for the first time in the hearing clinic.

A man who has severely low vision and never dreamed he could establish his own business gained the confidence and the vision aids to do so through the help of the vision rehabilitation clinic.

Read about their stories on the following pages. And know that with each encounter with each patient, our students learn they are being empowered to improve lives. It is what a WMU education does.

Best wishes,

Edward Montgomery

Edward Montgomery, Ph.D.
President

They gave gold

WMU's first Universitywide Giving Day, held Oct. 16, resulted in 1,366 donors contributing $136,968. Participants across campus, the state, the country and the world gave generously to support the Bronco initiative or initiatives of their choice, including student scholarships. ■

1,366 donors | **$136,968**

Princeton Review recognizes business school as elite

The Haworth College of Business is an outstanding business school, according to The Princeton Review. The education services company profiles the college in its 2018 annual business school rankings.

> **"We recommend the Haworth College of Business as one of the best places to earn an MBA."**
>
> —Robert Franek, Princeton Review senior vice president-publisher

"We recommend the Haworth College of Business as one of the best places to earn an MBA," says Robert Franek, Princeton Review senior vice president-publisher. "We chose the 267 on-campus MBA programs on this list based on our high regard for their academics and our assessment of institutional data we collect from the schools. We also solicited and greatly respect the opinions of 23,000 students attending these schools who reported on their experiences at their schools on our 80-question student survey."

Haworth is among an elite group of fewer than 5 percent of business schools worldwide that are accredited at both the undergraduate and graduate levels by the AACSB International—The Association to Advance Collegiate Schools of Business. Additionally, it is among a select 1 percent of business schools worldwide that have additional specialized AACSB accreditation for their accountancy programs. ■

Next development focus is the main campus South Neighborhood

The University's campus redevelopment work in the coming years will shift to what's known as the South Neighborhood and will see construction of a student center, new student housing and an eye-catching new presence showcasing the part of campus that runs along Stadium Drive.

Anderson

Dr. Diane Anderson, vice president for student affairs, points to changing demographics on campus that include strong international enrollment and a growing number of students from other states. Those changes to the student body coupled with the changing housing preferences of all students make this the time to consider and carefully plan for future housing needs, she says.

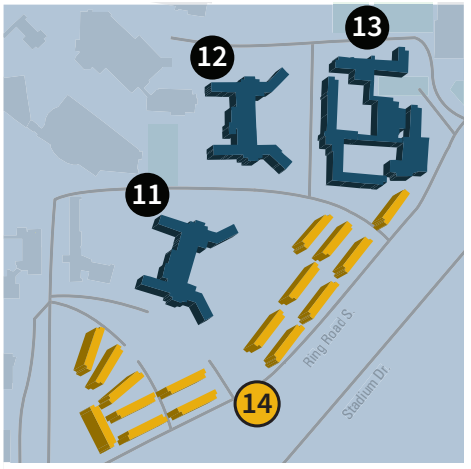
The first new student housing in the area will be ready for occupancy in 2020, while a new student center is targeted to come online in 2021. Intense long-range planning for the entire South Neighborhood is expected to begin soon and be completed by next October. That neighborhood master plan will guide development through 2023.

The South Neighborhood is highly visible from the adjacent Stadium Drive. That fact offers the University the opportunity to turn the area into a state-of-the-art campus gateway that offers a "wow" factor along what President Edward Montgomery recently noted is "the longest contiguous face of the campus."

City administrators have signaled interest in future development along Stadium Drive as well, and the Michigan Department of Transportation is looking at development work nearby.

"The chance to develop for our students' needs at the same time we coordinate with community needs and planning is a very appealing prospect," Anderson says.

The first new housing in South Neighborhood will replace Elmwood Apartments, a tract of 16 low-rise student apartment buildings that house about 220 students. Students currently living in Elmwood were informed in early November that once the academic year is over and their leases end, the apartments will be demolished to prepare the site for new student housing construction in 2019.



The area's housing is: 11–Ernest and Smith Burnham halls, 12–Draper and Siedschlag halls; 13–Zimmerman, French and Davis halls; 14–Elmwood Apartments; and not shown—Stadium Drive Apartments.

Residence Life personnel are working to help residents transition to new housing options. Elmwood demolition will begin in late May.

Find a map of campus neighborhoods at wmich.edu/students/neighborhoods/WMU-neighborhood-map2017.pdf. ■

CONGRATULATIONS GRADS
A total of 1,734 students were granted degrees in December. The mid-academic year commencement ceremony was the first President Edward Montgomery has presided over as the University's top executive. The presentation of diplomas on Dec. 16 included 1,260 at the bachelor's level, 443 at the master's level and 31 at the doctoral level.

$50,000-$55,000

This is the median salary range for students who earned a WMU graduate degree in 2016-17, according to the University's latest postgraduation activity report. The median range for undergraduates was reported as $40,000-$45,000. This annual survey of newly minted alumni documenting life after graduation also revealed that 91 percent of them are "actively engaged," meaning 71 percent are employed full-time, 14 percent are pursuing further education, 5 percent are in part-time employment, 1 percent are in military service and 0.3 percent are engaged in volunteering full-time. Find the full report at wmich.edu/career/planning under "Career Outcomes." ■

Profs get $2.6 million to train ESL learners

In response to the exploding number of English language learners in Michigan, the U.S. Department of Education's Office of English Language Acquisition has awarded a $2.6 million grant to a team of professors to boost professional development for teachers working with English learners.

WMU is the only university in Michigan among this year's awardees to obtain funding.

Drs. Selena Protacio, Susan Piazza, Virginia David and Hsiao-Chin Kuo, in special education and literacy studies, will use the five-year training grant to undertake the ELATE program, English Learners and Teacher Education.

The effort will provide a rigorous and comprehensive professional development program for both pre-service and in-service teachers. WMU pre-service teachers who have an interest in earning their ESL endorsement can apply to be part of the pre-service cohort wherein they would take three out of seven courses in the program. The classes would be paid for by the grant.

Meanwhile, WMU has partnered with six local education agencies, which have high needs in terms of educators with an expertise in working with English learners. Project ELATE will provide substantial financial support for these in-service teachers as they work toward earning the English as a second language endorsement. ■

Researchers get $12.5 million grant for school leadership renewal

Two longtime school leadership experts will use one of the largest single grants ever awarded to WMU for a three-year effort aimed at intense school leadership development in high-poverty schools across West Michigan.

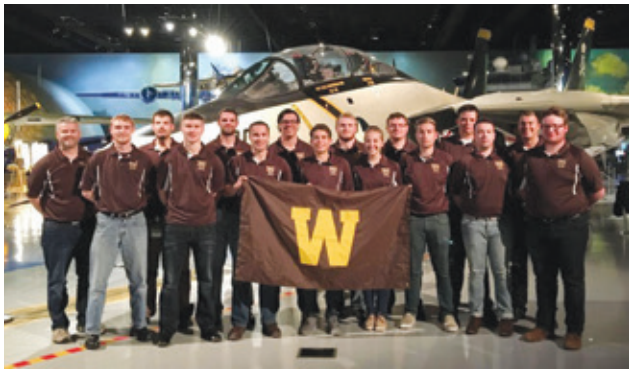
A $12.5 million award from the U.S. Department of Education will fund the High-Impact Leadership for School Renewal Project, led by Dr. Patricia Reeves, associate professor, and Dr. Jianping Shen, the John E. Sandberg Professor of Education and the Gwen Frostic Endowed Chair, in WMU's Department of Educational Leadership, Research and Technology.

The project focuses on two major outcomes—developing a strong pool of practicing school leaders and improving student achievement.

Working with a pool of elementary schools in 20 West Michigan counties, the project will support teams of school principals and teacher leaders by:

- Providing intense professional development and support, and money for renewal projects for teams of leaders in 75 schools that are implementing a set of new literacy essentials;
- Placing a trained team of school renewal coaches in each project school;
- Providing a lower level of professional development support and funding for leaders in an additional 75 schools; and
- Applying a set of proven school leadership practices for school renewal and sustainable implementation. ■

Sky Broncos clinch fifth consecutive regional championship



The Sky Broncos, WMU's precision flight team, won the National Intercollegiate Flying Association Region III event in October, qualifying for the national competition in April.

Capturing the top spot in both flight and ground events at regionals, WMU aviators qualified for the national competition April 30 to May 5 at Indiana State University. The win marks the fifth consecutive regional championship for the 15-member team.

"Our coaching staff is extremely proud of the true team effort that was put forth," says Marty Coaker, who coaches the team with Ryan Seiler. "Every member of the team helped make this win possible."

Competing against the Sky Broncos in the regional event were flight teams from Bowling Green State, Kent State, Ohio and Ohio State universities. Teams earn points for members who finish in the top 10 in a series of flight and ground events. WMU's team accrued 292 points during the event. Ohio State placed second with 187 points.

In 2017, the Sky Broncos finished fourth in the national competition, competing against teams from 27 colleges and universities around the country. ■

Bronson School of Nursing wins $2 million grant to boost diversity

What started with a $5,000 internal grant has grown into a nearly $2 million federally funded, four-year project to recruit, retain and graduate students currently underrepresented in the nursing profession.

Stark

The Nursing Workforce Diversity Grant, through the U.S. Health Resources and Services Administration, will fund the Empowering Nursing Students for Success project. It targets students from underrepresented groups and from educationally and financially disadvantaged populations, pairing them with faculty mentors and student "navigators" to help shepherd them through the Bronson School of Nursing program.

Fostering greater diversity in the profession is vital, says Dr. Mary Ann Stark, professor of nursing and the grant's principal investigator.

"Students who come from underrepresented minority groups have many challenges as they come to college," Stark says, noting that many struggle financially and graduate from underperforming K-12 schools.

"Greater diversity is also important because it helps increase the equity in our health care services," adds Dr. Ann Tyler, associate dean for the College of Health and Human Services and a driving force behind the college's diversity and research efforts. "This project will be a model from which our other programs in the college can learn as they also strive to foster greater diversity in their professions."

"We have a real mismatch between the racial and ethnic backgrounds of nurses compared to the people we serve in our state. So we put together this program and have found it to be wildly successful."

—Stark

THE PROJECT'S ORIGINS

With the help of a $5,000 grant from the WMU Office of Faculty Development, Stark and other nursing faculty members assembled a group of faculty and students to identify common academic and personal issues that impede the success of underrepresented students.

Underrepresented students in the program are called "scholars," while their older peer mentors have been dubbed "navigators." Under the watchful eye of a faculty mentor, the navigators help the scholars on several fronts beyond academics, including with navigating the collegiate environment and expectations.

By way of example, Stark related that, "one of our scholars came from a background where you showed respect for your faculty and you didn't bother them. That meant that you didn't ask questions and you didn't go see them in their office. She thought that you had to be invited."

EARLY SUCCESSES

Of the 14 scholars initially included in the program, all have been successful academically. Armed with the federal grant, the program is poised for much wider success. Almost half of the grant money goes directly to the scholar for scholarships or stipends. The rest goes to pay for mentoring and to hire student navigators.

Pointing to significant disparities between ethnic groups in terms of mortality and morbidity, and different cultural traditions and ways of communicating, Stark says it's important for the medical profession to mirror society in its ethnic makeup.

"We have a real mismatch between the racial and ethnic backgrounds of nurses compared to the people we serve in our state," Stark says "So we put together this program and have found it to be wildly successful."

In 2017, about 83 percent of the nursing workforce in Michigan was white, yet the state's white population overall was 75.4 percent. Meanwhile, 6.3 percent of nurses were black, compared with 14.2 percent of the general population.

The Latino nursing and general populations are even more skewed, Stark says. Latinos make up only 1.6 percent of nurses compared to 5 percent in the general population.

Stark says a more diverse nursing population enriches the profession with different talents and outlooks.

"It just results in a better delivery of care," she says. ■

Student-powered **clinical care**

Through WMU's Unified Clinics, student clinicians and supervising faculty provide specialty care to thousands in Michigan annually.

Caspers

Second-year graduate student Erin Caspers remembers the first time she knew her developing skill in occupational therapy helped improve life for a patient.

It involved a young man who had suffered brain injuries successfully using a spoon with his weakened hand in a public setting.

That kind of moment is everything to people who make it their life's work to help others, and it happened during Caspers' first semester in WMU's occupational therapy teaching clinic.

By working with real patients with real problems, student practitioners in WMU's array of outpatient health clinics learn early in their education the power of their future professions.

Through these outpatient clinical services, which include occupational therapy, speech-language therapy, hearing services and behavioral health counseling, students engage in patient care multiple times before graduation.

Caspers' patient, Trevor Rhoda, began the semester with a modified spoon designed to be virtually spill-proof, but his goal was to go from swivel spoon to regular utensil.

"By the end of the semester, he did not need the special spoon anymore," says Caspers, a Bay City, Michigan, native who was inspired to pursue a degree in occupational therapy after observing the care and comfort an occupational therapist provided her terminally ill grandfather.

"If you do not have the injury, that doesn't seem like a big deal. But it's a social norm to be able to eat with a normal spoon, and it is a big deal."

Rhoda's mother shot footage of her determined son eating with a regular spoon at a wedding and shared the video with student clinicians at his next therapy session.

"I was super proud," Caspers says. "That was a great moment."

What are the Unified Clinics?

Few of them are recorded, but there are thousands of moments similar to this one as a result of the care provided in WMU's Unified Clinics.

Under the auspices of the College of Health and Human Services, the clinics serve more than 5,000 clients annually.

Students, under the tutelage and supervision of clinical faculty, provide treatment and other therapeutic services using the latest knowledge in their disciplines.

"They get to go into the classroom, learn, and then go to the clinic and implement and apply and practice," says Dr. Earlie Washington, dean of the College of Health and Human Services.

"We are very fortunate at Western that we could build this scope of practice, with 10 different clinics all meeting real, current community needs, but that are nevertheless part of the teaching programs of our college.

"I've been looking at colleges similar to ours for a very long time, and I can say there are few colleges that are specialized health care providers and provide the scope we do at Western Michigan University," Washington says.

For occupational therapy students, such as Caspers, their first clinical experiences are offered primarily through the Unified Clinics.

Caspers admits that those first encounters with actual patients were intimidating.

"But there's a lot of preparing for it. The OT department does a really good job of preparing students," she says.

"They also try to push students out of their comfort zones because that's how you learn how to do things."

Now in her final semester in the program, Caspers is working at a skilled nursing facility in Bay City and later this spring will spend three months in an outpatient medical practice. She expects to graduate in June.

Learn more about WMU's Unified Clinics at wmich.edu/unifiedclinics. ■

The Unified Clinics are a large multi-specialty group practice that provides a broad scope of specialized health care and social services for thousands of patients. In addition, the clinics offer real-world clinical training experiences for hundreds of students from WMU's College of Health and Human Services. The faculty and students who work in the clinics are committed to meeting genuine community needs. The 10 clinics include:

- Behavioral Health Services
- Southwest Michigan Children's Trauma Assessment Center
- Van Riper Language and Speech Clinic
- Aphasia Communication Enhancement Program
- Voice and Respiration Lab
- Van Riper Hearing Clinic
- Spear Occupational Therapy Clinic
- Women's Health Services
- Vision Clinic
- Western Evaluation Center for Autism and Neurodevelopmental Disorders

5

THINGS TO KNOW ABOUT UNIFIED CLINICS

Practicing clinicians are faculty experts and students

Clinics are established based on community need

Patients are seen as early as birth up to 100+

The clinics treat 5,000+ patients annually

The Unified Clinics became a multi-specialty group practice in 1995, but some clinics have existed for more than 50 years

Clinics that care

Insurance stopped paying for Bill Hampstead's rehabilitation, though he could still benefit from therapies following a brain tumor surgery that he emerged from with limited movement on his right side and a motor speech disorder that rendered his words unintelligible.

So, as thousands of Michigan residents do each year, Hampstead turned to WMU's Unified Clinics for care.

Through this collective of teaching clinics associated with the College of Health and Human Services, student practitioners and supervising professionals provide specialty care and treatment.

The various clinics that comprise the operation were each created to train students in their disciplines, offer treatment services based on identified community needs and be incubators for researching therapeutic techniques.

In part because of the clinics, WMU has become a significant health care provider to the greater community. Annually, the operation serves some 5,400 patients during 50,000 appointments.

Including autism evaluation, child-trauma assessment, hearing services, low-vision services, occupational therapy, behavioral health counseling, speech therapy and women's health services, the range of expertise and scope of services are vast.

"That's a point of pride for the college," says Dr. Earlie Washington, the college's dean.

"It's really a teaching/learning clinical practice that benefits thousands of residents and families in southwest Michigan and beyond. That's one of the untold stories about the College of Health and Human Services."

Helped in rehab

As a longtime patient of the Unified Clinics, Hampstead travels to campus two times each week.

The one-stop-shop outpatient practice offers him speech-language therapy for his voice and articulation, occupational therapy for strength, mobility and daily living skills, and music therapy for similar reasons. And recently, swallowing therapy was added to his treatment.

Some 15 years ago, Hampstead emerged with unexpected impairments from surgery to remove a tumor from his brain stem. When he woke from the procedure, his right side was paralyzed and he couldn't speak clearly. His physical recovery, hampered by post-operative setbacks, was lengthy. And his impairments ended his career as a psychologist.

When he came to WMU for speech therapy 10 years ago, Hampstead could vocalize, but his speech was not understandable.

After his years in treatment at WMU, Hampstead's speaking voice is still strained and his pronunciation of words is far from normal, but the former psychologist who once relied on the clarity of his words to help his clients understand their lives can now, again, use speech to be understood by those in his life.

"There's a lot of misunderstanding in medicine and in rehabilitation about how much recovery people can regain for a long time" after an injury, says Sandra Glista, a speech-language pathologist and master clinical faculty member in WMU's Department of Speech, Language and Hearing Sciences.

"You can continue to have your brain rewired for years. It may be slow rewiring, but it's still rewiring."

Before he began making real progress, Hampstead communicated primarily by moving letters on a portable magnetic board or through a speech-generating device.

> "It helps me talk, and it teaches (students) how to interact with patients."
>
> —Hampstead

But now, he says in his hoarse and strained speech, "I'm able to communicate without a spelling board," also adding that, "I'm getting better and more comfortable talking to people."

And he feels good about working with students.

"It helps me talk, and it teaches them how to interact with patients," he remarked following a speech therapy session.

Specialized care

The Unified Clinics have become a go-to for residents who need long-term rehabilitation and maintenance, says Dr. Carol Sundberg, director of the multi-specialty group practice.

"Our faculty and students serve them so they can continue to make progress," she says.

Affordability also is a significant factor for many in the client base. Patients receive treatment that is unavailable elsewhere, may not be covered by insurance or is unaffordable through other providers.

"What's special about the clinics is that they provide these really essential services that other entities wouldn't provide, and they're meeting these unmet needs.

"We have been recognized in the community as the safety net," Sundberg says.

A self-funded operation that receives no financial allocation from the University, the Unified Clinics take insurance, but also provide treatment on a fee-for-service basis and contract with third-party payers as well as government agencies, including the Kalamazoo Community Mental Health and Substance Abuse Services, the Michigan Department of Corrections, and the U.S. Department of Veterans Affairs.

Guided by occupational therapy student clinicians Hannah Burtch and Otis Kemutambah, longtime Unified Clinics patient Bill Hampstead works a hand bike as part of his weekly strengthening and range of motion regimen in the occupational therapy clinic.

5,400 PATIENTS ▶ MORE THAN **50,000** VISITS *PER YEAR*

Patients hail from all over Michigan

Occupational therapy clinicians help Bill Hampstead, who has a weakened right side, practice daily living activities, including cleaning.

Patients generally pay less, sometimes by hundreds, than they would elsewhere. Clinic leaders also tap into grants to help lessen the financial strain for those who come to the clinics for help. Between 2011 and 2016, for instance, patients received $867,000 in charity care.

Though the Unified Clinics were established as a multi-specialty group practice in 1995, some of the individual clinics have been around for many more decades.

The Van Riper Language and Speech Clinic was founded 80 years ago.

Sundberg

The vision clinic, offering low-vision services to people who are visually impaired and need special assistive aids to see, dates back more than 50 years.

Others were established in more recent times, such as the Children's Trauma Assessment Center—CTAC. Founded 17 years ago, this center's experts evaluate children affected by trauma to uncover how abuse, neglect, prenatal alcohol exposure and traumatic experiences have affected their development, behavioral functioning and social-emotional health.

CTAC clinicians provide insight to foster parents, therapists, teachers, caseworkers and a child's other caregivers.

"Only at a university are you going to be able to bring together the group of professionals—many of them experts—around the table to provide an assessment for a traumatized child or figure out if somebody has autism. It's difficult for anybody outside of a university setting to bring those kind of power people to the table. That's what's really special, our ability to do that," Sundberg says.

"Some of our services are so specialized you would send people here because you can't get it anywhere else," she adds. ■

> "What's special about the clinics is that they provide these really essential services that other entities wouldn't provide, and they're meeting these unmet needs. We have been recognized in the community as the safety net."
>
> —Sundberg

Speech-language pathology graduate student Julia Simon and patient Bill Hampstead spent last semester working on his articulation skills.

Meet a student clinician

Julia Simon, a speech-language pathology graduate student, sits in a small room across from her first client, a man practicing making the "s" sound, a difficulty for him.

He has dysarthria, a disorder marked by weakness in the muscles that control speech. His voice is hoarse and his words run together, but his articulation has improved with therapy.

Simon takes him through a lesson plan that she's carefully crafted, but in these sessions, he's also teaching her in a way, the first-year graduate student says.

"It's cool that the clients know that we're students. They know that we're learning from them. They know that they are helping us (learn our discipline) as we're trying to help them," she says.

"They're being the teacher as well as the student in a way."

All the while, Simon's clinical supervisor Ron Kelley, a speech-language pathologist with decades in the field, observes the sessions behind a one-way mirror. On occasion, he'll interject with guidance as well as debrief after each session with Simon and the other student practitioners he supervises.

Simon, who hails from the metro Detroit area, has completed her first semester in the speech-language pathology master's degree program at WMU.

She wanted a career that would satisfy her interest in science, that wouldn't require spending her days behind a desk and that would involve working closely with people on self-improvement.

She found all three qualities in speech-language pathology, a profession that diagnoses, assesses and treats communication and speech disorders in adults and children.

"There's a science aspect to it, a teaching aspect to it. You get to be connected with clients, and there's a wide range of settings you can work in," says Simon, who majored in neuroscience as an undergraduate at Michigan State University and minored in communicative sciences and disorders.

Within weeks of starting at WMU last fall, while taking classes, she began working with a client in the Van Riper Language and Speech Clinic, one of several teaching clinics associated with the College of Health and Human Services, Simon's academic home.

"It was intimidating, but it's a good experience getting in there right away," she says. She also met weekly with a group of international students learning English as their second language and has been tapped a few times to serve on a diagnostic team working with children experiencing speech fluency problems.

Though new at it, she enjoys helping people overcome or better manage their speech difficulties and thereby, perhaps broaden their world.

"If you can't communicate, you're kind of isolated," she says.

"Helping them communicate will help with their relationships, will help them enjoy life, just everyday things. So, it's important." ■

CLINICS THAT CARE

'Holistic' hearing help

Four-year-old Karys Huinink, left, experienced a whole new world when she received her hearing aids. Karys is pictured with her sister Jozina and mom, Sara.

Sara and Daryl Huinink's 2-year-old daughter suddenly halted outside the building that houses WMU's Unified Clinics. Her eyes swept her surroundings as though she were encountering the world for the first time.

In life-changing ways, the little girl was taking in her world as never before.

Newly fitted with tiny pink hearing aids, Karys Huinink was finally experiencing a full range of sound on that late summer day more than two years ago.

"She had this look of amazement on her face," Sara recalls of her always-spunky daughter frozen in place. "She literally stopped and looked around, and when you stop and listen, you hear the birds, the wind, the cars driving by."

It was an unforgettable moment.

Along with the joy of knowing their daughter could hear was relief that they had found a patient-focused audiologist and one who would be there for Karys' ongoing needs in the years ahead, including to address vocabulary and language deficits through aural rehabilitation.

WMU's Van Riper Hearing Clinic is one of 10 outpatient clinics known collectively as the Unified Clinics. They operate under the auspices of the College of Health and Human Services, giving students hands-on clinical experience and the community at-large a group practice that offers an array of specialty clinics.

Last year alone, WMU hearing clinic audiologists and student practitioners treated more than 2,000 patients in southwest Michigan, from newborns to centenarians.

"We do the diagnosis, fit the hearing aid and then provide rehabilitation after the fitting of the hearing aid," says Dr. Teresa Crumpton, the clinic's coordinator of audiology and Karys' audiologist.

The Huininks are a close-knit, fun-loving family. From left, Samuel, Aliyah, Daryl, Karys, Jozina, Sara and Hope.

KARYS' STORY
View a short video of Karys' first hearing aid usage at bit.ly/2B5j46J

What sets WMU's audiology clinic apart from many other hearing centers are its aural rehabilitation services, Crumpton says.

"Aural rehabilitation looks at the impact of the hearing loss and tries to close the gap between chronological age and vocabulary, language and listening age," she explains.

But, to the Huininks, WMU's audiology services are distinctive because of the high level of personal care they first heard about and then experienced for themselves.

That distinctive care has included the quick turnaround getting Karys' hearing aids and treatment, clinical staff's efforts to tap into grants to help relieve some of the financial strain of acquiring hearing aids, and providing the parents with insight about the genetic condition behind their daughter's hearing loss.

When Karys was 2, the Kalamazoo couple learned their daughter had mild-to-moderate hearing impairment and that she had been hearing impaired since birth. With that late discovery, they were frantic to lose no more time getting her hearing help.

A fellow church member whose child was a patient at WMU's hearing clinic suggested they contact Crumpton.

"In a matter of weeks, (Karys) had her hearing aids and molds and everything done," Daryl says.

The couple still tears up watching the video capturing their daughter's reaction when her hearing aids were installed. The girl's expression is one of awe as she listens, experiencing greater clarity and volume, to her dad's, mom's and Crumpton's voices.

That moment felt long in coming.

When Karys was born, she failed hearing tests in the hospital just like the Huininks' first two children. But with each child, Sara says, she was told not to worry because newborns may fail screening in the hospital due to fluid in their ears.

That seemed to be the case with Karys, who, just as her older siblings, passed a subsequent hearing screening after leaving the hospital.

But Karys was "super fussy" during that later testing.

"I walked away feeling like, 'That didn't feel right,'" Sara says. "But, I thought, 'They said she passed. They wouldn't tell me she passed if she didn't pass.'"

As they watched Karys grow, the couple noticed she didn't speak much, though all of their other children spoke early and were talkative.

Their Karys was not a talker, Sara says, "but she had a totally different personality than our other kids, too. So, I thought, 'She's just different.'"

Also allaying concerns: The accounts of other parents who spoke of late-talking kids and a pediatrician who advised that as long as Karys was speaking five to 10 words, not to worry. Karys had a handful of words, and her vocabulary continued to increase in the months that followed her pediatrician's counsel. She also would react to sound—her parents' voices, for instance—but not always.

Often, Crumpton says, babies can seem to parents to be hearing normally when they are not. Almost all U.S. newborns are screened for hearing at birth, but, unlike the Huininks' children, only about half get the recommended follow-up screening.

"If a baby has mild hearing loss, the baby can appear to be hearing normally because the parents are holding them close," Crumpton explains. "And the other thing is that most of the responses of a newborn baby to sound are purely reflexes. They might appear to startle. They might appear to eye blink. But that does not tell you that a baby's hearing is normal."

"She literally stopped and looked around, and when you stop and listen, you hear the birds, the wind, the cars driving by."

—Sara Huinink

When Karys was 2, the Huininks decided to pursue another hearing screening to quell their lingering doubts once and for all.

She failed the test, but ultimately got the help she needed at WMU, including an aural rehabilitation regimen that has helped the now 4-year-old advance in vocabulary and language.

"When I run into other people with hearing loss, I sing the praises of this place because it's just been so beneficial to us," Daryl says.

"I don't know that holistic is the right word for it, but it's family-centered. Dr. Crumpton cares about us. And she cares about our other kids. She takes the time." ■

She returned to **serve**

Eminhizer

Dr. Alyssa Eminhizer was working at her first full-time professional job after finishing her graduate studies at WMU when a former professor contacted her with an enticing offer.

It was the summer of 2016, and Eminhizer, fresh off earning her Doctor of Audiology degree from WMU in the spring of the year prior, was basking in Chicago's big city life while working as a clinical audiologist at a private practice there. Her professional life was just beginning, but the scenery was about to change.

Dr. Teresa Crumpton, an audiologist and clinical coordinator of speech pathology and audiology at WMU's Unified Clinics, was on the phone.

"She said, 'We'd like to offer you a job. How about coming back?'" Eminhizer says. "The decision was easy."

A Portage, Michigan, native who also holds a bachelor's degree in Speech, Language and Hearing Sciences from Purdue University, she became Crumpton's newest colleague, and now serves as a clinical faculty specialist at the clinic.

"The same reason I decided to get into audiology is one of the main reasons I decided to come back to WMU—the community service aspect of it," she says. "I knew I wanted to get into health care, and thought about pharmacy, but I wanted to help people all the way through their treatment. I kind of stumbled into audiology. I love it. I get to help people face to face every day."

Currently, she provides a host of services at the clinic, performing comprehensive diagnostic tests, hearing aid fittings, cochlear implant candidacy evaluations, newborn hearing screening and Occupational Safety and Health Administration hearing conservation tests, just to name a few.

Hearing is, fundamentally, about developing connection, she says. So, whether it fades gradually as one becomes older, or takes a sudden hit as a result of trauma or disease, the result is a person unable to fully interact with the world around her.

"Many times, we don't think about it until it's gone," she says, adding that hearing loss can cut you off from people. "Think about it—it's how we develop language. Hearing loss can lead to a host of issues—anxiety, depression, isolation. It can be devastating for a person."

It's no surprise, then, that Eminhizer says she often counsels patients who come to see her, as well as their families, on ways to relate to one another, communicate better and deal with their new realities.

"Hearing aids are amazing, but they are only part of the treatment," she says.

The clinic, which serves hundreds of people annually, is open to the entire community. Eminhizer herself has seen patients as young as newborn babies and as old as 103.

"That's one of the things I like about the clinic—we serve everyone," she says. "This is not just a resource for the University community. It's here for the whole area."

Graduate students in audiology at WMU are in the clinic within the first few weeks of their academic training, Eminhizer says, working with patients and getting hands-on experience.

> Getting in the clinic reinforces what's being learned in the classroom. It really drives home why you're in school—that there's an end goal. Our students' education is very well-rounded.
>
> —Eminhizer

It's one of several aspects of the clinic that sets WMU apart from other schools with similar facilities.

"Getting in the clinic reinforces what's being learned in the classroom," she says. "It really drives home why you're in school—that there's an end goal. Our students' education is very well-rounded."

She's also active outside the clinic, serving as faculty advisor for the Student Academy of Audiology. This past August, students in the organization held a fundraiser golf outing, where $2,000 was raised—$1,400 of which went to help people who have low incomes pay application fees for a no-cost hearing aid program. The remaining funds went to help the clinic pay for services for children. Organizers plan to continue this event annually.

Charitable work also extends to a program called Project Connect, an annual gathering of social service agencies that connect homeless folks or those who are housing insecure with various resources. Clinic faculty and members of SAA attend, providing outreach services and educating those in need about what is offered.

Most people will experience some level of hearing loss as they age, Eminhizer says. But she does have a piece of advice.

"Whether you're mowing the lawn, at a loud concert or even weed-whacking—wear hearing protection. Me? I have five packs of earplugs in my purse." ■

Before treatment, he could not say a word

While out west preparing for her son Trevor Rhoda's return to the Kalamazoo area, Tammie Walker learned about WMU's Aphasia Communication Enhancement Program, a therapeutic service offered within the University's Unified Clinics.

Rhoda was in a Utah hospital for nearly 80 days recovering from severe brain damage and, upon returning home, would need treatment for aphasia, a language disorder, along with other rehabilitation.

"We Googled that word (aphasia) and then found the Unified Clinics. Not only could they help him with aphasia, but he also got into (occupational therapy) and was introduced to music therapy, recreational therapy and art therapy," Walker says.

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>
> —Tammie Walker

She says the kind of ongoing care Rhoda has received through WMU the past seven years wouldn't be affordable elsewhere, and she appreciates that his therapies spring from the latest evidence-based techniques.

"Sandra has been amazing as far as really researching different methods and the most successful programs to bring back," Walker says of Sandra Glista, who oversees the aphasia clinic and is a master clinical faculty member in WMU's Department of Speech, Language and Hearing Sciences.

"She's constantly looking at different methods."

Rhoda, who had been an accomplished snowboarder and known in that sport, was first injured during a snowboarding trip in Michigan's Upper Peninsula in 2010 and then had a second incident, a stroke or seizure, that caused more damage while he was vacationing out of state 10 months later.

All told, his mother says, the 29-year-old has endured six brain surgeries, including to remove a portion of his right frontal lobe, and 16 other surgeries related to his injuries.

His treatments at WMU address spasticity on his right side and the effects of aphasia.

Aphasia is typically the result of a traumatic brain injury or a stroke. People with it may have difficulty with reading, writing, speaking, expressing ideas or with comprehending oral communication. Rhoda has trouble in all these areas, but he's come a long way.

"When he first came to Western, he was not saying a word," Walker says. "Not even a word."

Before his injuries, her son completed an associate degree and had plans to pursue a bachelor's in agricultural engineering and to continue working on his family's farm.

Though he'll never be back to his original abilities or life plan, he's made progress incrementally. Or, as Rhoda remarks of his recovery: "Long time. Slow."

"I'm always happy, though," he says. "I'm not sad."

He tends to speak in short, often one-word, sentences like these. But it shows he understands what's said to him. As demonstrated in a recent session with graduate student Jenna Buscemi, he can now put sentences together verbally and orally. He's made inroads in reading, too.

"Most of his communication difficulties are with his expression of language and getting out what he's meaning to say," says Buscemi, who began studying in the speech-language pathology graduate program and treating Rhoda this past fall semester.

Looking at his file, "it's amazing to see how far he's come," she adds.

"I'm always happy, though. I'm not sad."

—Trevor Rhoda

The sessions are something he looks forward to, to advance and to socialize.

"What's nice about Western, especially for younger people … (is) he doesn't consider himself as the patient," Walker says.

"Trevor feels like he and the students are both learning equally. So, he's a teacher for the therapy students. And they're his teachers.

"He doesn't ever feel like it's some adult telling him what to do, and he feels he's a part of it. That's been huge." ■

Through ongoing treatment, Trevor Rhoda has experienced great advances in regaining his ability to speak and read. Speech-language pathology student practitioner Jenna Buscemi takes Rhoda through the kind of exercises that have helped him.

Not merely picky eaters

Clinic treats children who exhibit severe 'food selectivity'

Imagine being presented with a plate of your most-loathed foods.

The meal is allegedly edible, but you find its appearance, scent or imagined textures repugnant. Your gag reflex is engaged, but you're expected to eat—and without complaint.

Suarez

This is a real dilemma for children who are highly "food selective," not just picky, but who have a fight or flight response to many or most foods.

"We usually classify children who will eat less than 10 foods, or who refuse whole food groups, as being severely food selective," says Dr. Michelle Suarez, an associate professor of occupational therapy who researches and treats the condition.

This also presents a dilemma for parents trying to nourish a child who will only abide a strictly limited diet, potentially undermining the child's health.

Almost six years ago, Suarez established the Finicky Feeders Food Selectivity Clinic at WMU to help children and parents in this situation. The occupational therapist has long been interested in feeding and eating behaviors and also has worked with programs outside of WMU that treat children who have disordered eating habits.

"But I couldn't find any effective treatment protocols that were not invasive and could be done in an outpatient setting. So, we developed that here. There are other protocols out there. We believe ours is unique in the combination of elements that we include," she says.

The Food Selectivity Clinic may be the most specialized of the programs offered within WMU's Unified Clinics, a health cooperative providing clients with therapy for a variety of conditions while also operating as a training ground for students pursuing degrees through the College of Health and Human Services. In the Food Selectivity Clinic, occupational therapy undergraduate and graduate students work with clients under the supervision of a professional occupational therapist.

The children they serve are not to be confused with youngsters who don't like certain vegetables or who dislike drinking beverages other than soda.

The clinic has treated children who, for example, refuse to consume any solid food or will only eat one type of food. As a result, lacking proper nutrition, a child may be underweight or even overweight.

There are "kids with food selectivity who have failure to thrive," Suarez says. "That means they are not taking in adequate calories to support growth. Or, on the other end, sometimes our kids are overweight or obese because they will eat only processed foods."

As an outpatient service, however, the clinic is not intended for children who are dangerously under- or overweight, or who are malnourished. Inpatient programs in hospitals and other settings treat children in need of more intensive intervention.

What causes food selectivity?

Underlying food selectivity, WMU clinicians hypothesize, may be a sensory-processing problem, specifically being over-responsive to sensation. Sufferers have heightened sensitivity to the tastes, smells and textures of foods.

This may not seem serious, but it can be a stressful, even scary, quandary for families.

"One of the most important things we do as parents is nourish our children. When that doesn't go right, parents feel guilty. They feel like they've failed. They feel inadequate," Suarez says.

"Parents talk about how people will say to them, 'Oh, they'll eat when they're hungry enough.' But our families describe severe food avoidance behavior, and it's not simply a matter of: Just keep giving it to them and they'll eat it eventually. That just doesn't happen with the kids we see. It's to that extreme."

Not all, but many children treated in the clinic have a comorbid diagnosis, such as autism, an anxiety disorder or some other neuro-behavioral condition.

About four years ago, Dr. Ewa Urban sought the clinic's help for her then-4-year-old daughter, who does not have a disorder of any kind, but had strict limits on what she would eat.

During one period, "she was pretty much eating milk and smooth yogurt," says Urban, who works in WMU's Office of Career and Student Employment Services as an associate director.

"She has some issues with textures and flavors. Things are not attractive to her. She was at the point that when we were cooking food, she would hide in her room because the smells would bother her."

> **“One of the most important things we do as parents is nourish our children. When that doesn’t go right, parents feel guilty. They feel like they’ve failed. They feel inadequate.”**
>
> —Suarez

WMU’s finicky feeders protocol

The clinic’s clients—generally between 2 and 14 years old—are challenged to consume non-preferred foods through a methodical step-by-step process developed by Suarez. The strategy includes positive reinforcement, systematic desensitization, use of visual cues and what clinicians call a “just-right challenge.”

WMU researchers are currently studying the effectiveness of the protocol with a grant from Blue Cross Blue Shield.

Other key aspects of the treatment include what parents are expected to do.

“We teach the families how to recognize how their children are feeling, how to read their child’s cues, how to provide them with an appropriate challenge, how to set expectations, how to require the child to meet that challenge and how to reinforce the child’s success,” Suarez says.

To graduate from the treatment program, one of the criterion is that the child be able to take a bite from all family foods at every opportunity.

Urban’s daughter was in the program for about two years. Today, the 8-year-old is still a discriminating eater, but she also eats a greater variety of food—something from each food group, her relieved mom says. And she’s willing to try foods. Apples, for instance.

“They were once disgusting to her, and they had to be peeled,” Urban says. “Now she’s like, ‘I’m going to eat them with skin.’ And now she’ll only eat them with skin.”

A victory. ■

Another chance in sight

(Starbucks employees who earn college credits at other institutions might be able to transfer into ASU's online program as juniors or seniors.) In other words, this tuition-assistance program, like many others, is not everything it may seem to be. Other potential pitfalls with such programs...
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this change in
of symbols," a

The vision rehabilitation clinic has a range of devices to assist low-vision patients, including closed-circuit television systems that can magnify and even audibly read written material.

Before Dave Gebbink became a client of the vision rehabilitation clinic at WMU, he didn't drive and didn't believe starting his own business was a possibility.

Gebbink has a congenital form of optic atrophy, an incurable condition characterized by a progressively weakening optic nerve that has left the 48-year-old with impaired vision.

"Everything is just blurry. Close. Far. Everything," he says.

He believed there was no help for him—until he started receiving vision rehab and adaptive aids through the vision rehabilitation clinic, the only provider in southwest Michigan that offers the full range of low-vision services.

"Vision is such a precious gift, and when you don't have it, your world turns upside down. So, if you can functionally utilize it again, it changes people profoundly."

—Dr. Matthew Johnson,
WMU Vision Clinic optometrist

The clinic, which sees more than 200 patients annually, doesn't have cures. Patients' vision losses are almost always permanent and many are progressive. Macular degeneration, glaucoma and diabetic retinopathy are the primary conditions that bring people to the clinic.

Clinicians offer adaptive devices that allow patients to maximize their remaining vision and, in many cases, be more independent in the face of vision loss.

"We're not their health doctors. We deal more with function," says George Kremer, a vision rehabilitation therapist and the clinic's coordinator. "We focus on: How do we get the most out of their remaining vision with glasses, magnifiers, lighting and electronic aids."

The clinic also has a connection with the University's Department of Blindness and Low Vision Studies. Students studying to be vision rehab therapists, orientation and mobility specialists or teachers of the visually impaired regularly observe professional staff with patients. And they become familiarized with the adaptive devices prescribed to patients.

Such devices have hugely improved Gebbink's quality of life, he says. A pair of bioptic lenses—essentially glasses mounted with a small telescope—allows him to legally and safely drive. A closed-circuit TV system magnifies and reads written material for him.

In part, because of the aids, Gebbink opened a mechanic shop in 2014 in Tekonsha, Michigan, a community about 50 miles southeast of WMU's campus. With his CCTV system, for instance, he reads torque specifications and other important instructions while working in his shop.

Gebbink appreciates that the clinic's optometrist, Dr. Matthew Johnson, cares about his practical needs.

"He doesn't just sit you down and give you a pair of glasses. He says, 'What are you doing that I can help you with?'" Gebbink says

Each patient has an individualized treatment plan that "focuses on their goals, not mine—what the patients want to do," Johnson says.

Gebbink knew what he wanted to do—possibly drive again—but he didn't know whether that was an achievable goal. Clinicians spend a lot of time counseling patients about to what degree, realistically, aids can augment their limited vision and improve their quality of life.

"When you're visually impaired, we can only do so much through contacts and glasses. The rest has to be specialized magnification devices," Johnson says.

"Watching people be able to read again, when they never thought that was possible, is huge. It can be very emotional because you'll have patients who break down with real tears because they never thought they would be able" to do it again.

Gebbink learned about the low-vision services at WMU four or five years ago while seeking help for his then-teenage sons, all of whom have optic atrophy.

In the course of pursuing services for them, Gebbink realized he also could be helped, giving him more independence and, most recently, a new livelihood.

"Watching this transformation occur, he's truly been a success story," Johnson says.

"Vision is such a precious gift, and when you don't have it, your world turns upside down. So, if you can functionally utilize it again, it changes people profoundly." ■

Physics grad involved in tracking gravitational wave event

A 2016 alumnus is playing an important role as scientists around the world chronicle, for the first time, what happens when two neutron stars collide.

Ian Brown, currently a graduate student at the University of Wisconsin-Milwaukee, has been a participant on one of the international observational teams tracking the phenomenon known as a kilonova.

The event was first detected in mid-August. In simultaneous announcements Oct. 16 in Europe and the United States, the international teams unveiled visual observations and information on the gravitational waves they had detected.

The collision of two neutron stars in a galaxy 130 million light years away is providing scientists on Earth a front row seat to document the event. For the first time, scientists have been able to simultaneously sense the collision in gravitational waves and observe the light generated by the calamity through dozens of ground-based optical and radio telescopes and several U.S. and European orbiting observatories in space.

For his part, Brown's name appears as a contributor on two scientific papers that have resulted from the work in observing the event. Shortly after the international announcement, he emailed his mentors in WMU's Department of Physics, Drs. Clement Burns, Paul Pancella and Lisa Paulius.

"It is partly due to your recommendations that I was in the right place at the right time to be included in this amazing astronomical event," Brown wrote to them. "...I have to say, given the current events, grad school is turning out a lot more fun that I thought it would be."

Brown majored in physics at WMU and was named a Presidential Scholar in his discipline. ■

Professors named academic leadership fellows by MAC

Three faculty members have been named to the inaugural class of a new academic leadership development program sponsored by the Mid-American Conference.

Drs. Kieran J. Fogarty, director and professor of interdisciplinary health sciences, Maarten Vonhof, professor of biological sciences, and Devrim Yaman, associate dean of undergraduate programs for the Haworth College of Business, have been named 2017-18 Inaugural Academic Leadership Development Program Fellows. They are among 36 faculty and administrators from MAC institutions who were selected.

"This will be an excellent tool to enhance the growth and development of future leaders in higher education and is another way in which the MAC can provide value to its membership beyond intercollegiate athletics."

—Jon Steinbrecher, MAC Commissioner

The MAC Academic Leadership Development Program is a professional development program that identifies select faculty and administrators to develop, prepare and enhance their ability to be effective academic leaders.

"This will be an excellent tool to enhance the growth and development of future leaders in higher education and is another way in which the MAC can provide value to its membership beyond intercollegiate athletics," says MAC Commissioner Jon Steinbrecher. ■

Engineering professor secures $200K grant for neurological research

The National Science Foundation has awarded a mechanical and aerospace engineering professor $204,000 to support research designed to help improve the medical diagnosis and treatment of patients with diseases related to cerebrospinal fluid flow in the brain.

Dr. William Liou, professor in the Department of Mechanical and Aerospace Engineering, is collaborating with Dr. Shinya Yamada, chief of neurosurgery and chief of the Hydrocephalus and Cerebrospinal Fluid Research Center at the Toshiba Rinkan Hospital in Japan.

Their research looks at abnormalities in cerebrospinal fluid—which surrounds the brain and spinal cord—and how they affect health.

"Cerebrospinal fluid is believed to circulate in the central nervous system, protecting the brain from trauma by providing buoyancy and transporting nutrients," Liou says. "Abnormalities in the fluid, its containment space, and its circulation have been related to several diseases, such as hydrocephalus, Alzheimer's disease, schizophrenia and multiple sclerosis."

The project will use state-of-the-art brain imaging and computational science equipment to study how the cerebrospinal fluid flow impacts the brain.

"This research is unique because we are looking at the dynamics of the cerebrospinal fluid and the blood flow systems in the brain and using computer modeling to get an advanced understanding of its impact on health," Liou explains. "We are hoping that by studying the physics of the bio-turbulent flow of cerebrospinal fluid, we can learn how to help patients with some of the associated diseases." ■

EMPATHY

across the ages

"Students have learned about the residents' lives and perspectives, helping them carry the experiences into the workforce and beyond. The residents have learned about the world through the students' eyes."

— *Nancy Ayers, Clark on Keller Lake administrator*

For more than a year, three graduate students have made their home in a special communal setting off campus.

It's similar to a college dorm—single rooms, common areas for socializing and a dining center under one roof.

But, in this case, the students are sharing their meals, their time and their personal lives in an assisted-living facility with residents who are in their 80s and 90s, an unusual arrangement anywhere in the country.

"It's not like being on campus, and it's not like being at home," says Colette Chapp, a 23-year-old from St. Clair, Michigan, who moved in having had many past experiences as a volunteer or visitor in assisted-living and nursing homes.

"But this was very unique," she says. "I wasn't volunteering and leaving. This was my home. I was here to stay. There was no out if things got weird."

Not at all weird, she and the other students have found, but enlightening and heartening.

"A lot of the times, I have felt like I was a surrogate family member."
—Corey Youngs, graduate student

COREY'S STORY
View a short video
at bit.ly/2DkrgF8

"When the students first came here, I felt perhaps it would be loud and busy. You never know what young people are going to do at night. But it's been wonderful."
—Jean Hoover, Clark assisted-living resident

Good neighbors

As part of a study examining intergenerational interaction and relationship building, the students are cohabitating with about 40 elders to engage as side-by-side residents.

"The students are essentially trying to be good neighbors," explains Nancy Hock, one of two occupational therapy faculty members leading the study set at Clark on Keller Lake, a retirement community in suburban Grand Rapids, Michigan.

After learning from a previous Clark administrator that the facility had unused rooms, she pitched the idea for this project inspired by a similar intergenerational community in the Netherlands.

Hock, coordinator of WMU's occupational therapy program in Grand Rapids, says the arrangement has been a "win-win" for students and for Clark's traditional denizens.

"The residents have the opportunity to interact with younger people. They hear about their lives. They hear about what's happening with them on a daily basis," she says. "And it's also a win for the students because they have a decrease in expenses that a typical graduate student would have," because they're not paying for housing.

After undergoing a rigorous interview process, the students chosen for the project moved into Clark in August 2016 and will move out this April. Throughout that period, researchers are conducting interviews and collecting data from both the seniors and the students. They will present their study findings at the World Federation of Occupational Therapists' World Congress in Cape Town, South Africa, in May.

By living in close quarters with seniors, the students—all studying to be occupational therapists—say they have gained insights they might not have gotten easily any other way, insights proving to be beneficial for their personal knowledge and for their development as aspiring professionals.

This collegiate trio—Chapp, Lori Johnson and Corey Youngs—has observed, for instance, resiliency in the face of persisting frailty, the comfort that comes with long-lived relationships, but also individuals dealing with social isolation toward the end of life.

"They've learned the people in this facility are facing loss, loss of function, loss of independence," Hock says. "So, that's difficult for them to witness."

Making connections

The graduate students live in the home full time and are encouraged to spend at least 30 hours a month with their neighbors. So, between going to class and other aspects of their personal lives, students make time to eat meals, play games, watch television and movies, or simply hang out talking with their older neighbors.

The arrangement is so unusual, however, some of the seniors, though they knew students would be among them, didn't quite know what to make of their new cohorts. Were they at the facility to work? Volunteer? Be occupational therapists? It took time for students to fit in as simply friends.

"When the students first came here, I felt perhaps it would be loud and busy," says Jean Hoover, a retired teacher who has lived at Clark for more than seven years.

"You never know what young people are going to do at night. But it's been wonderful," she says.

"For me, mostly it's been the students popping into my room and talking to me, and we just relax and enjoy. Then the other part is the students will sit with us at mealtime and that's enjoyable."

Senior resident Charlie Lundstrom bonded with Johnson.

"I'm computer illiterate," confides the retired attorney. "Lori was my teacher for probably 10 or 12 weeks. Once a week, we'd have a meeting where she taught me how to use a computer. I enjoyed that. That was helpful."

“The students are essentially trying to be good neighbors.”
—Nancy Hock, project co-leader

NANCY’S STORY
View a short video at bit.ly/2FHHLtf

“When we are not exposed to older people, this may create stereotypes.”
—Dr. Maureen Mickus, project co-leader

But from what students have experienced, getting some of the older residents to open up and talk with them—and even with one another—has been no small thing. The difficulty has been one of their take-home lessons from the project.

"It might be partly the culture of a retirement home; it can be very isolating," says Youngs, a 26-year-old from Trenton, Michigan.

"The people who were really thriving are the ones who have family who are consistently showing up, and that is giving them a sense of belonging and purpose."

For people who do not have that consistent family connection, "that's where we as students have a lot of utility. A lot of the times, I have felt like I was a surrogate family member," he says.

Engendering empathy

Empathy across difference is one of major hoped-for outcomes of this project. At age 23, Chapp hadn't known the pain and disorientation of losing multiple friends and family members due to infirmity or age. But that's often a consequence of living into your 80s and 90s.

Since the students moved in, 15 of the assisted-living center's residents have passed away, including several people the WMU students considered friends.

"That's been one of the major challenges," Chapp says. "They did warn us that was a very likely possibility when we moved in, but I don't think I was prepared for the extent of it. We lost a lot more people than we ever would have guessed, and I never realized how close I would be to the people we've lost."

As hard and as unwelcome a lesson as that has been, it put some of the seniors' initial hesitation to connect in a new light.

"The residents have sort of commented that they are reluctant to start new relationships because there is always the possibility they could lose that person pretty quickly," Chapp says. "And once you put yourself out there so many times, it's hard to convince yourself to try again."

Project organizers also see the arrangement as a way to help shatter stereotypes older and younger generations may harbor for one another in a society in which, typically, very young and very old people don't live together or have other meaningful engagement.

"Some of the consequences of that are, in my opinion, quite serious," says Dr. Maureen Mickus, an associate professor of occupational therapy, a gerontologist and Hock's partner in the research project.

"Aging is a natural part of the human condition, and when we are not exposed to older people, this may create stereotypes, misunderstandings, or perceptions that are not always positive."

According to a 2017 Generations United/ Eisner Foundation survey titled "I need you; you need me" looking into age segregation in the United States, 61 percent of young adults age 18 to 34 say they have a limited number of acquaintances who are much older and much younger.

And 53 percent of all the survey's respondents, 2,171 adults over age 18, reported that outside of family members, they spend little time with people who are much older or younger than they are.

"I think it's very easy to overlook this population," Youngs says of older generations.

"Getting to old age is always a far-off idea, and nobody thinks that eventually they're going to end up there. And the fact of the matter is, these are all normal, functioning human beings."

He adds that getting to old age also can be a "great equalizer because everybody ends up in the same place, and everybody has the same need to be in the presence of others." ■

"She taught me how to use a computer. I enjoyed that."
—Charlie Lundstrom, Clark assisted-living resident

"It's not like being on campus."
—Colette Chapp, graduate student

To **heal** *and to* **learn**

Third-year medical student Duncan Polot treats a patient at the Holy Family Healthcare clinic in Hartford, Michigan.

Western Michigan University Homer Stryker M.D. School of Medicine students gain valuable experience and give back through volunteering at local clinics.

When he makes the drive to volunteer at Holy Family Healthcare, third-year medical student Michael Chavarria says he is quickly reminded of why he decided to become a doctor.

The pediatric clinic, located about 35 miles southwest of Kalamazoo in Hartford, Michigan, operates under the leadership of Dr. Don Bouchard and serves as a holistic resource for medical care, food and clothing for rural migrant workers in Van Buren County.

Since the summer of 2017, Chavarria and several other Western Michigan University Homer Stryker M.D. School of Medicine students have volunteered at the clinic, providing care for patients and learning under the wing of Bouchard and Dr. Cheryl Dickson, the medical school's associate dean for health equity and community affairs.

The clinic, which opened in 2014, is one of two where WMed students and the medical school's Student Physician Engagement Clinics student interest group—SPEC—volunteer their time while improving their clinical skills and, more importantly, learning the value of service and giving back to the community.

"It's definitely a great skill builder," says Chavarria, who leads the Latino Medical Student Association, or LMSA, at WMed.

"But I think you could get a lot of that without coming here. What I tell students is they're going to get good grades, you're going to study hard, you're going to do well on tests, that's always going to happen, but you don't need to put off being a good person … This is the best thing I've done at this school. It is what I want to do with the rest of my life."

LMSA has partnered with SPEC to coordinate students' twice-a-month visits to the clinic in Hartford. Members of SPEC, under the guidance of Dickson, also volunteer twice a month at the Medicine-Pediatrics Clinic at WMed's Oakland Drive Campus.

At Holy Family Healthcare, up to eight WMed students volunteer their time one Friday and one Saturday a month.

Their time at the clinic offers the students in-depth experience and interactions with patients that will serve them well. First- and second-year students are tasked with compiling patient histories under the eye of third- and fourth-year students and then presenting their findings to the attending physicians, Bouchard and Dickson.

The experience is much the same for students who volunteer at the Med-Peds Clinic. First-year students greet and show patients to their rooms, take vitals and ask about a patient's chief complaint.

They're followed by a second-year student who conducts the patient history and physical under the leadership of a third- or fourth-year student. The more senior students then assist one another with presenting the patients' cases to the attending physicians, either Dickson or Dr. Joseph D'Ambrosio, WMed's associate dean for clinical affairs.

What's been most valuable for Anna Trinh, a first-year student who has volunteered at the Hartford clinic, is learning from second-, third- and fourth-year medical students, including what to ask patients during a physical exam.

"I feel good that I'm helping out," she says. "I want to be able to help people as much as I can during my education. I don't want it to be just about me, I want it to be about the people I'm serving."

Students from SPEC were pivotal in establishing a structure for students to volunteer and gain experience in a clinic setting.

"The great thing is that from their diversity they just bring this wealth of knowledge, this wealth of approaches to things," Bouchard says of the students who have volunteered at Holy Family Healthcare.

"That the school is allowing them, but also that the students have the initiative on their own to enrich their education and their lives by enriching the lives of others who are less fortunate, is amazing."

The clinic focuses on providing health care to the children and families of migrant workers in Van Buren County, which has the highest per capita rate of migrant workers of any county in the state of Michigan, according to Bouchard.

In addition to providing pediatric care, the clinic in Hartford offers a food pantry and patients in need can also find clothing to wear and other items. On a Saturday in October, Chavarria arrived with numerous things to donate, including clothes, bicycles and a toaster oven.

"I've been impressed with the level of compassion, the level of understanding and the level of global thinking with the students and their understanding of where they are in relation to others. They're very insightful."

—Bouchard

"I've been impressed with the level of compassion, the level of understanding and the level of global thinking with the students and their understanding of where they are in relation to others," Bouchard says. "They're very insightful."

Dr. Cheryl Dickson, left, and Dr. Don Bouchard

At both sites, Dickson says, students are also getting an opportunity to treat patient populations that, historically, are underserved and subject to health disparities.

"I think it's important because they learn in the classroom about vulnerable populations and to actually have experience working with an underserved population helps them understand some of those needs," Dickson says. "Every community has populations that are underserved, so this experience is something they need to have.

"It also provides a level of empathy we want all students to have," Dickson adds. "It's that empathy that gets embedded early enough, and it helps them know that part of their charge is service and that's what being a physician is, being of service to others and being of service to those who have a need."

Third-year med student Sulin Wu, who began pushing for a student-run clinic when she arrived at the medical school in 2015, says the time she and other students are spending at the clinics is valuable because of the educational aspects of the experience, but also the connections students make with the community and with each other. The experience has been rejuvenating and reminds students why they decided to go to medical school, she says. ■

Loneliness: A threat to your health

Checking blood pressure, pulse rate, respiration and temperature is standard procedure during a doctor's office visit. And, if Dr. Maureen Mickus had any say in it, chronic loneliness would be on the list of physicians' inquiries, too.

"That should be as important as your blood pressure," says Mickus, an associate professor of occupational therapy and gerontologist whose research interests include loneliness.

She feels so strongly because studies suggest that chronic loneliness, the gap between how much social contact you want and how much you get, can harm your physical and mental well-being.

"We have research that has been able to document the impact on health in many ways—increased blood pressure, premature death, independent risk factor for Alzheimer's disease, dysregulated sleep, elevated C-reactive protein, which is an inflammatory marker related to stress," Mickus says.

As a gerontologist, she has studied the effects of loneliness in the context of old age, but also emphasizes that loneliness can be an issue for younger age groups, too.

As high as 35 percent of U.S. adults age 45 and older said they were lonely in a 2010 AARP survey that used the well-regarded UCLA Loneliness Scale. Of these millions, 45 percent reported that their feelings of loneliness had been persistent for six years or longer.

Perhaps relatedly, it's becoming increasingly common for U.S. citizens to live alone—27 percent in 2013 compared to 5 percent in 1920, according to Census figures. While living solo does not

"We have research that has been able to document the impact on health in many ways—increased blood pressure, premature death, independent risk factor for Alzheimer's disease, dysregulated sleep, elevated C-reactive protein, which is an inflammatory marker related to stress."

—Mickus

"If there was one lesson I would want individuals to understand is to find a family. It doesn't have to be a biological family. But find people who will be in your corner, involved in your life."

—Mickus

automatically result in loneliness or social isolation, it can put one at greater risk for these.

And more of us today say we do not have a single confidant compared to 30 years ago. In 2016, 25 percent of the U.S. population reported having no key person to confide in versus 10 percent in 1985, according to University of Chicago research.

There's mounting evidence to suggest, Mickus says, that loneliness should be understood as a public health concern by the medical community and by society in general.

Taking loneliness seriously and raising awareness may lead to interventions. For individuals, she says, it's important to maintain and cultivate meaningful relationships throughout life.

"If there was one lesson I would want individuals to understand is to find a family. It doesn't have to be a biological family. But find people who will be in your corner, involved in your life," she says.

Just being in the presence of others doesn't necessarily suffice.

"I see that in nursing home settings. One may be surrounded by 100 other residents at that nursing home, but no one there, including the staff, really knows who the individual is, or who she or he was prior to coming to the nursing home.

"It isn't just relationships. It's relationships that are meaningful that make the difference," Mickus says. ■

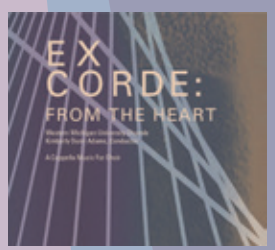
Decade Zero

Dr. Christopher Biggs

Dr. Christopher Biggs' "Decade Zero" is a compilation of works for instruments and electronics. His compositions focus on environmental, political and scientific extra-musical concepts. Featuring the Western Brass Quintet, the title track, "Decade Zero," explores the last period in which humanity can take decisive actions to combat climate change without facing irrevocable changes. Meanwhile "Externalities," for amplified cello and electronics, balances a consumer's attempt to minimize the negative outcomes of his consumption choices with reflections on participatory economics. Through continuous stratifying and blending of music, "Amass," for clarinet and electronics, reflects on contemporary society's desire for meaningful change. Biggs, a composer and multimedia artist, is an associate professor of music. Learn more about "Decade Zero" and its other tracks at www.ravellorecords.com.

Ex Corde

The Western Michigan University Chorale



The University Chorale's mission to present heartfelt and deeply emotional renditions of classical choral repertoire is intended to move and inspire listeners. In that spirit, the award-winning ensemble recorded "Ex Corde," a Latin phrase that means "from the heart." The album, featuring compositions by Anton Bruckner, Hugo Distler, James Erb and others, was recorded in Kalamazoo's Holy Family Chapel at the Sisters of St. Joseph Nazareth campus. The CD is available for sale at any WMU choral concert held on or off campus as well as online through amazon.com, itunes.com and Spotify.

Songsmith Collective

Ensemble: Songsmith Collective

The School of Music's advanced jazz ensemble's latest and eponymous album, "Songsmith Collective," sets the works of celebrated poets—including Robert Frost, Langston Hughes, William Butler Yeats and WMU alumna Dr. Traci Brimhall—to vocal and instrumental jazz. The album received acclaim with 4.5 stars and a review in *Downbeat Magazine.* And the ensemble performed the album's pieces at the famed Jazz Gallery in New York and recorded them at Systems II recording studios, also in New York. To obtain the CD, contact Dr. Andrew Rathbun, director of the ensemble and associate professor of music, at andrew.rathbun@wmich.edu. ■

I chose the **right** profession

”

“I had all sorts of clients, and they viewed me as the expert. That could be intimidating. But our program at WMU has a philosophy of learning on the job, of getting your feet wet. When you see progress in people, whether it’s a person who stutters or a stroke victim with aphasia or a child with autism, and see them communicating and expressing themselves, it’s just wonderful.”

—Getty, on her experience as a student clinician

The young man could barely speak, a world of words in his active and imaginative mind locked up as a result of cerebral palsy.

For the first 18 years of his life, the most he was usually able to say was a simple "yes" or "no" or make gestures with his head to communicate.

But Dr. Laura Getty had the key.

Getty, a speech-language pathologist with the Van Buren County Intermediate School District in southwest Michigan, met with the young man and his mother, who understood her son's needs oftentimes through intuition alone.

Getty spent time with him and later found funding for and programmed an alternative communication device with several words and phrases placed on buttons on the machine.

He explored the device and became familiar with it, pressing the buttons and hearing an automated voice speak the names of his pets, family members and classmates. A new world was emerging for the young man. Getty told him it was time to get back to class, but he had something to tell her. He pressed a button. "Thank you" rang out from the device's speaker.

"I thought, 'thank you for what?'" she says. "Then it hit me. That young man's life had changed. I still think about that, and wonder who got more out of it—him or me? I knew I had chosen the right profession."

Getty graduated from WMU master's degree program in speech pathology in 1990, and she earned a doctorate in special education, also from WMU, 17 years later.

The speech-language pathologist has been working with the Van Buren County Intermediate School District, about 30 miles southwest of WMU, for more than 20 years.

She helps children and young adults—from age 3 up to 26 years old—who present with a range of cognitive and physical disabilities. Some need help honing their speech. Some stutter. Others have not spoken for years. Getty looks for ways to help them communicate.

"There was a time when some people with disabilities were placed in institutions, but now we can help them," she says.

"Communication is what sets us apart from other animals. It's a human need, a manifestation of our innate desire to connect. So, when we have trouble with it, it chips away at our self-esteem. It can be very frustrating for people. I learned long ago that this job was as much about being a counselor as anything else."

The genesis of that learning took place when Getty was a graduate student, when speech and language pathology resided on WMU's East Campus. She remembers a tight-knit community of committed students, and of faculty members who thought nothing of chatting up students in common areas, lending advice and sharing wisdom.

But some of her most fond memories of student life are of her times working in WMU's Unified Clinics, where students—under the helpful and watchful eye of a clinical supervisor behind a one-way mirror—begin working with clients almost as soon as they begin their graduate studies.

"It was wonderful, scary and inspirational," she says of her time as a student in the clinic.

"I had all sorts of clients, and they viewed me as the expert. That could be intimidating. But our program at WMU has a philosophy of learning on the job, of getting your feet wet. When you see progress in people, whether it's a person who stutters or a stroke victim with aphasia or a child with autism, and see them communicating and expressing themselves, it's just wonderful.

"We don't discriminate in the clinic as to who we will treat. We want students to see a diverse array of patients."

Getty also teaches at the University, most recently an introductory course in speech-language pathology. It keeps her connected to WMU and involved in one of the most-respected speech-language pathology programs in the nation, she says. And she still keeps in touch with several of the thousands of students she's taught over the years.

"In the speech-language pathology world, when you hear WMU, you think quality," she says.

"I would hire a graduate in a minute. It's a grueling program, and requires commitment, but in the end, a graduate from the program can face pretty much anything as a professional. I'm honored to still be a part of the University and especially the speech, language and hearing sciences department." ■

Send submissions to: teresa.ventimiglia@wmich.edu. Include your name (first, middle, last, maiden), degree(s), year(s) graduated and a daytime phone number by which we can reach you. We will publish photos as space permits.

Robert Azkoul, BA '53, MA '54, MA '72, recently retired after 21 years directing the Kentwood (Michigan) Senior Chorale. He has provided music leadership and services to churches and civic groups for more than 65 years.

Peter W. Krawutschke, BA '66, MA '67, was elected chair of the WMU Emeriti Council.

Moses L. Walker, BA '66, MBA '90, the driving force in founding the Family Health Center in Kalamazoo and a 47-year member of its board of directors, was recently honored as the namesake for the health center's Paterson Street facility. The facility is now known as the Moses L. Walker Building.

Jane Cwayna, BS '70, MS '74, was inducted into the California Community College Women's Volleyball Coaches Association Hall of Fame. She was recognized for 32 years of successful coaching at Antelope Valley College in Lancaster.

Dennis C. McCrumb, BS '71, was a recipient of WMU College of Education and Human Development's 2017 Golden Apple Award. He is a faculty specialist in the college's Department of Educational Leadership, Research and Technology.

Henry Jay Meeuwse, BA '73, MA '74, has retired after 30 years of service from James Island Presbyterian Church in Charleston, South Carolina.

Ronald Wheeler, BBA '73, owner of Wheeler Real Estate Services LLC, was named 2017 Realtor of the Year by the Greater Lansing (Michigan) Association of Realtors Board of Directors.

Paul Matyas, BS '74, has retired from the Kalamazoo County Sheriff's Office, where he served nine years as undersheriff. He also served 33 years as a police officer for the Portage (Michigan) Police Department and four years as a chief investigator to the Michigan State Police Multi-County Citizens Grand Jury.

Gregory A. Chacharon, BBA '76, has been elected to serve on the Clover Area Assistance Center Board of Directors in Clover, South Carolina.

Martin T. Mendiola, BA '76, is the executive director of Northern Marianas College's Rota campus in Susupe, Saipan, Northern Mariana Islands.

Tom Vance, BS '78, MA '05, communications officer for the Kalamazoo Community Foundation, is the editor of a new book, "An Oral History of Portage Schools: Cleora Skinner to Pete McFarlane."

Michael Bogren, BA '79, was selected as one of 2018's Best Lawyers in America. He is a partner in Plunkett Cooney's Kalamazoo office.

Terry O'Hearn, BBA '79, is the new conveyor components territory manager for Superior Industries Inc., a manufacturer and global supplier of bulk material processing and handling systems headquartered in Morris, Minnesota.

James C. Farquhar Jr., BBA '81, is retiring as mayor of Grosse Pointe Farms, Michigan. He has served seven terms, making him the city's longest-serving mayor. He also is retiring from his family business, Grosse Pointe Florists Inc.

Regina Joseph, BS '81, was the keynote speaker at the SMART Girls Rise Above luncheon at the Fettig Youth Campus of the Boys & Girls Clubs of Benton Harbor, Michigan. She is retired after almost 30 years with the Dallas (Texas) Police Department.

Steve Hall, BS '83, has been promoted to director of regulatory affairs for FlightSafety International.

Thomas Lawrence, MA '83, was inducted into the Michigan Athletic Trainers' Society Hall of Fame. He is the head athletic trainer at Kellogg Community College in Battle Creek, Michigan.

David Arney, BBA '84, is the new chief financial officer for Atlanta-based PureRED Integrated Marketing.

Kris Bray, BM '85, is the athletic director for Superior Central School District in Eben Junction, Michigan.

Jim Loerop, BS '85, is the chief corporate development officer for Lupin Pharmaceuticals Inc. in Naples, Florida.

Paul A. Stermer, BS '85, is director of Food Bank of the Hudson Valley in Cornwall-on-Hudson, New York.

Joseph Calvaruso, MBA '86, has been appointed by Michigan Gov. Rick Snyder to serve on the World War I Centennial Commission. Calvaruso is the executive director of the Gerald R. Ford Presidential Foundation.

Mike Treash, BA '87, has been appointed the senior vice president and chief operating office for Detroit-based Health Alliance Plan.

Vernon Coakley Jr., BS '90, has been promoted to assistant chief of the Kalamazoo Department of Public Safety.

Christina L. Corl, BS '91, was honored by the Ohio Diversity Council as one of the "Most Powerful and Influential Women in Ohio" at its leadership conference in October. She is a member of Plunkett Cooney's labor and employment law practice group.

Bonnie Bisson, BA '92, is vice president for sales enablement for media-delivery firm Valassis in Livonia, Michigan.

Robert Lathers, MSW '92, is retiring as chief executive officer of The Right Door for Hope, Recovery and Wellness in Ionia, Michigan.

Jason Cabel Roe, BS '93, recently launched Roe Strategic, a political consulting firm that focuses on candidate and initiative campaigns and public affairs.

Ed Garner, MBA '94, is the new regional director for Small Business Development Center's West Michigan Regional Office located at Grand Valley State University in Allendale, Michigan.

Christopher W. Tremblay, BA '94, MA '99, is the author of the new book, "Walt's Pilgrimage," a chronicle of Walt Disney's travels. He also is the co-author of "Lucy's Laptop," a new children's book.

Bolding

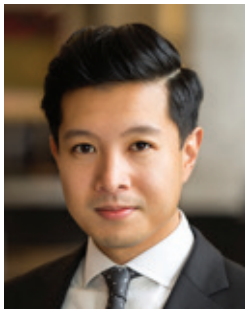
Rhonda L. Bolding, BBA '96, is marketing manager for Strada, a design firm in Pittsburgh.

Tim Dunn, MA '96, is the athletic director for Immaculate High School in Danbury, Connecticut.

Cullen Schwarz, BA '03, is the co-founder of a Boston-based web browser and app called DoneGood. DoneGood directs consumers to purchase from companies that are committed to making a positive social impact.

Timothy G. Zajaros Jr., BBA '03, was a producer of the Netflix movie "Mudbound."

Eric Dahlstrom, MA '05, received the Hemet Unified School District's Governing Board Recognition of Excellence Award. He is the principal of Tahquitz High School in Hemet, California.



Salazar

Anthony Salazar, BBA '06, was named to the 2017 *Forbes*/SHOOK "America's Top Next-Generation Wealth Advisors." He is a vice president and certified financial planner for Merrill Lynch in Chicago.

Fancesca Bourgault, BA '08, is the owner of Windham Movement Apparel, a retailer serving the dance, yoga and circus community in Brattleboro, Vermont.

Nichole Walz, BS '08, a chiropractor and yoga instructor, recently developed a mobile app called The Anjali App. The app helps cellphone users stand with good posture.

LisaMarie Malischke, MA '09, is an assistant professor of anthropology and archaeology at Mercyhurst University in Erie, Pennsylvania.

Sarah J. Murray, BA '09, is the associate director of the office international development at Indiana University in Bloomington.

Demarra Gardner, MA'10, is founder of the recently launched Black Women About Business, a support program for aspiring, novice and seasoned entrepreneurs. Gardner also is president of Change Agent Consulting in Kalamazoo.

Eric Woodyard, BA '10, is a sports writer covering the Utah Jazz for the *Deseret News* in Salt Lake City.

Joseph Elsheikhi, MA '12, is the math consultant for Berrien Regional Education Service Agency in Berrien Springs, Michigan.

Daniel Getts, MBA '12, is vice president of research for TCR2 Therapeutics, an immuno-oncology company in Cambridge, Massachusetts.

Tarin Tripp, BA '12, is the executive director for Hope Haven of Northeast Georgia, a private nonprofit corporation providing services to individuals with developmental disabilities in Athens.

Meagan Ward, BBA '13, recently spoke at the U.S. Embassy in Tbilisi, Georgia, at "The Future is Ours" campaign. Ward is the founder and co-owner of FEMOLOGY. She also is the owner of Creatively Flawless Branding Agency.

Elizabyth Hiscox, PhD '14, is the author of the poetry collection "Reassurance in Negative Space," published by Word Galaxy Press, an imprint of Able Muse.

Khalid el-Hakim, MA '13, was featured in *Black Enterprise* magazine as a "BE Modern Man." He is the founder of Black History 101 Mobile Museum.

Joshua Merchant, PhD, '14, is the new president of Buena Vista University in Storm Lake, Iowa.

Amanda Pastroff, BS '17, is a human resource generalist assistant for Wightman & Associates Inc., in its Benton Harbor, Michigan, office.

Leone H. (Wisneski) Weber, BS '41, Nov. 10, 2017, Mt. Pleasant, MI

Elizabeth (Worden) Dye, BA '42, Oct. 2, 2017, Portage, MI

Ruth A. (Houseman) Hartgerink, BA '43, Oct. 6, 2017, Grand Rapids, MI

Patricia A. (Johnson) Barlow, BS '48, Oct. 31, 2017, Michigan City, IN

Frank Dedecker, TC '48, Sept. 21, 2017, Clinton, MI

Betty J. (Luck) Walker, BS '48, Oct. 8, 2017, Livonia, MI

Dorothe J. (Griffin) Bachert, BA '49, Sept. 6, 2017, Bloomfield, NM

Ester K. (Hansen) Breed, BS '49, Oct. 12, 2017, Midland, MI

Henry Karwas, BS '49, Oct. 31, 2017, Waterford, MI

Jack R. Blanke, BS '50, TC '50, MA '54, Oct. 13, 2017, Kalamazoo

George Duditch, BS '50, MA '54, July 25, 2017, Detroit

George Wisner, BA '50, Nov. 16, 2017, Hudsonville, MI

James H. Yochim, BA '50, March 6, 2017, Albuquerque, NM

Doris M. (Spivey) Cox, BA '51, Nov. 12, 2017, Dowagiac, MI

Elton T. Krogel, BS '51, Sept. 18, 2017, Bloomingdale, MI

Seth James Payson, BS '51, MA '60, Oct. 19, 2017, Battle Creek, MI

Eugene F. Bowers, BA '52, Oct. 4, 2017, Roeland, KS

Kenneth C. Drake, BA '52, MA '60, Nov. 3, 2017, Owosso, MI

Patricia J. (Chamberlain) Payson, BS '52, Sept. 14, 2017, Battle Creek, MI

Phyllis J. (Tuch) Brill, BS '53, Sept. 23, 2017, Hillsboro, OR

Wayne D. Claflin, BA '53, Aug. 16, 2017, Kansas City, MO

Marilyn A. (Grimes) McFadden, SC '53, Oct. 20, 2017, Marshall, MI

Floyd 'Hal' Creal, BBA '54, Sept. 3, 2017, Coldwater, MI

Joseph E. Kincaid, BS '54, Oct. 20, 2017, Portage, MI

Ava F. (Hathaway) Elliott, BS '55, Sept. 7, 2017, Davenport, IA

Deane B. McKercher, BA '55, Oct. 14, 2017, York, PA

John M. Brawders, MA '56, Aug. 22, 2017, Birchwood, WI

Edward A. Kane, BBA '56, Oct. 16, 2017, Ellwood, IN

Ronald J. Kasher, BS '56, Oct. 30, 2017, Norton Shores, MI

Charles F. Norris, BS '56, Oct. 14, 2017, Fort Pierce, FL

Ruth G. (Allen) Tydeman, BA '56, MA '65, Nov. 7, 2017, Kalamazoo

Francis J. Apotheker, BS '57, MA '59, Aug. 26, 2017, Kalamazoo

Bruno J. Masnari, BS '57, Sept. 18, 2017, Three Rivers, MI

Keith W. Patterson, BSE '57, Sept. 24, 2017, Ionia, MI

Frank K. Riley, SC '48, BA '57, MA '58, Nov. 6, 2017, Grand Haven, MI

John T. Roberts, BBA '57, Oct. 6, 2017, Owosso, MI

Gary J. VanHeukelum, BS '57, Nov. 2, 2017, Three Rivers, MI

Robert B. McKenzie, BS '58, Oct. 8, 2017, Vicksburg, MI

John A. Wulf, BS '58, Oct. 14, 2017, Tullahoma, TN

Jack L. Bond, BS '59, MA '64, Sept. 11, 2017, Lawrence, KS

Sallie J. (Duisterhof) Campbell, BS '59, Oct. 1, 2017, Traverse City, MI

Elmer F. Craig, MA '66, Aug. 31, 2017, Lexington, KY

Eva J. (Klett) Dunn, BA '59, Oct. 8, 2017, Elkhart, IN

Dale L. Erickson, BS '60, Aug. 27, 2017, Old Hickory, TN

Meade A. Gougeon, BBA '60, Aug. 27, 2017, Bay City, MI

Constance L. (Norlin) Harmon, BS '60, Nov. 23, 2017, Avon, OH

Jobe B. Morrison, BS '60, Sept. 23, 2017, Dayton, OH

Norbert C. Gorski, SC '61, Oct. 27, 2017, Grand Ledge, MI

Mary C. (Palmer) Hartman, BM '61, MA '69, Aug. 23, 2017, Laguna Vista, TX

Mildred Jane (Merson) Moore, MA '61, Nov. 14, 2017, Holland, MI

Roberta (Thorn) Myers, BS '61, Oct. 14, 2017, Three Rivers, MI

Luis J. Volpe, BS '61, MA '65, Oct. 11, 2017, Battle Creek, MI

Fredric B. Zook, BBA '61, MA '64, Nov. 6, 2017, Scottsdale, AZ

Joan E. (Gott) Devellis, BS '62, Sept. 9, 2017, Marstons Mills, MA

James W. Habel, BS '62, Sept. 19, 2017, San Antonio

Sara J. (Evarts) Moyer, TC '53, BA '62, MA '75, Nov. 19, 2017, Centreville, MI

Richard F. Raklovits, MA '62, Nov. 21, 2017, Kalamazoo

James L. Woehler, BS '62, Nov. 14, 2017, Great Falls, MT

Dian L. (Butterfield) Zahner, BS '62, Sept. 16, 2017, Spokane, WA

Karen A. (English) Fawley, BS '63, Sept. 7, 2017, Kalamazoo

Dorothy A. (Pellegrini) Ferris, MA '63, Oct. 28, 2017, Grand Rapids, MI

Nancy M. (Maul) Keller, BA '63, Nov. 1, 2017, Boise, ID

Michael E. Murch, BS '63, MA '67, Sept. 14, 2017, Alpena, MI

Miriam E. (Bauman) Sundstrom, MA '63, Nov. 15, 2017, Marysville, MI

James A. Venema, BS '63, Sept. 28, 2017, Hockessin, DE

Diane D. (Dorland) Bodi, MA '64, Nov. 11, 2017, Louisville, KY

Betty J. (Styles) Hallyburton, BS '64, Nov. 22, 2017, Tampa, FL

Alan C. Coe, BBA '65, MBA '66, Sept. 21, 2017, Saline, MI

Ronald W. Hamilton, BBA '65, Oct. 2, 2017, St. Joseph, MI

Morey A. Kays, BS '65, Aug. 13, 2017, Ashville, NC

Inara (Freimuts) Kurt, BA '65, Nov. 14, 2017, Traverse City, MI

Frank J. McGinnis, BBA '65, Nov. 7, 2017, San Diego

Jan D. Mudica, BS '65, Sept. 8, 2017, Jackson, MI

Alice M. (Mabie) Neidlinger, BS '65, MA '89, Feb. 26, 2017, Hudsonville, MI

William J. Terman, MA '65, Oct. 31, 2017, Spring Arbor, MI

DeVonne G. (Marble) Turner, BS '65, Oct. 24, 2017, Granger, IN

Aletha (Hill) VanDonkelaar, BS '65, Oct. 25, 2017, Grants Pass, OR

Sharon A. (Swetish) Cornish, SC '66, Nov. 4, 2017, Lawton, MI

Clara J. (Snyder) Hartwig, TC '44, BA '66, Sept. 29, 2017, Coloma, MI

Marvel J. Kinney-Sundin, MA '66, Nov. 14, 2017, Salt Lake City

Mary H. (Teugh) Myers, TC '53, BS '66, MA '76, Aug. 27, 2017, Tucson, AZ

Paul R. Papranec, BS '66, Nov. 16, 2017, Grand Rapids, MI

Joan A. (Siegfried) Nuyen, BA '67, MA '71, MA '94, Aug. 30, 2017, South Haven, MI

Bruce A. Roe, MA '67, PhD '70, Nov. 9, 2017, Grantsburg, WI

Elaine J. Sikkenga, BA '67, Oct. 22, 2017, Muskegon, MI

Daniel T. Stokoe, BA '67, MA '76, Oct. 26, 2017, Kalamazoo

Zelda H. (Geater) Bower, MA '68, Oct. 26, 2017, Vinton, IA

Aylene D. (Davis) Goddard, MA '59, MLS '68, Oct. 4, 2017, Kalamazoo

Frederick Karasinski, BS '68, Nov. 17, 2017, Grand Rapids, MI

M. John MacDonald, BS '68, Oct. 7, 2017, Petoskey, MI

Glenn Phillips, BS '68, Sept. 9, 2017, New Middletown, OH

Joseph S. Pipan, MBA '68, Oct. 21, 2017, Falls Church, VA

William M. Stoddard, BS '68, Nov. 7, 2017, Laketown, MI

David E. Swanchara, BBA '68, MBA '77, Nov. 5, 2017, Berkley, MI

Kenneth A. Welt, MA '68, Oct. 27, 2017, Missoula, MT

Dennis M. Breidenstein, BS '69, Oct. 20, 2017, Lansing, MI

William M. Burr, BS '69, Oct. 27, 2017, Plainwell, MI

Robert J. Drury, BS '69, MA '72, Sept. 16, 2017, Sand Point, MI

David L. Elwell, BBA '69, Sept. 14, 2017, Norton Shores, MI

Glenn G. Grace, BS '69, Oct. 9, 2017, Farmington Hills, MI

Donald A. Hlavacek, BS '69, Nov. 9, 2017, Stuart, FL

Wanda J. (Pratt) Hoy, MA '69, Sept. 20, 2017, Kalamazoo

Carl A. Kaminski, BBA '69, Oct. 20, 2017, St. Joseph, MI

Diane K. (Ziesmer) Kasnicki, BA '69, Nov. 5, 2017, Ann Arbor, MI

John A. Schlukebir, BBA '69, MA '76, Sept. 26, 2017, Kalamazoo

Dorothy J. (Schuster) Schroeder, BA '69, MA '70, Aug. 31, 2017, Indianapolis

Joy E. Spoor, BS '69, MA '87, Oct. 14, 2017, Athens, MI

Roland R. Barkow, MA '70, Nov. 13, 2017, Three Rivers, MI

Mary L. (Singer) Bloomberg, MA '70, Oct. 14, 2017, Battle Creek, MI

Dolores (Ross) Broberg, BS '70, Sept. 24, 2017, Cut Bank, MT

James M. Cleveland, BBA '70, Aug. 30, 2017, Battle Creek, MI

Marilyn R. (Schneider) Fisher, BS '70, Oct. 30, 2017, Bloomfield Hills, MI

Gary J. Groat, BS '70, MA '75, Sept. 3, 2017, Niles, MI

Robert A. Haines, BBA '70, Sept. 8, 2017, Houston

Eva E. Miler, BS '70, Sept. 11, 2017, Toledo, OH

Kenneth F. Pawlowski, BA '70, Sept. 9, 2017, Venice, FL

Rose M. Stromsta, BS '70, MA '73, Sept. 11, 2017, Kalamazoo

Anthony J. Wilson, BS '70, Oct. 14, 2017, Grand Rapids, MI

Michael C. Allerding, MA '71, Oct. 30, 2017, Jenison, MI

Judy A. (Mrozek) Elliott, BS '71, MA '76, Sept. 14, 2017, Constantine, MI

Dalton D. Holt, BS '71, Sept. 17, 2017, Fountain, MI

Bruce D. Karazia, BS '71, MA '75, Oct. 8, 2017, Kalkaska, MI

Sherry L. (Hook) Meyers, BS '71, Sept. 24, 2017, Angola, IN

Elizabethe M. (Montgomery) Schau, BS '71, MOT '82, Nov. 10, 2017, Kalamazoo

James H. Nichols, BS '72, Sept. 1, 2017, Tampa, FL

Thomas S. Ringelberg, BS '72, Sept. 28, 2017, Grand Haven, MI

Laura L. (Kiefer) Childress, BA '73, Nov. 19, 2017, Baldwin, MI

Karen L. (Glaser) Cole, BA '73, Nov. 4, 2017, Mooreland, IN

Mae F. Cooks, BA '73, Oct. 18, 2017, Berrien Springs, MI

Ivan L. Krawczak, BA '73, MA '75, Nov. 21, 2017, Alpena, MI

Eugene D. Repke, BA '73, Nov. 23, 2017, Alpena, MI

Roger W. Zwiers, BA '73, MA '80, Nov. 15, 2017, Kalamazoo

Barbara L. Curtis, BS '74, Oct. 27, 2017, Hendersonville, TN

Kristine A. (Kaiser) Foor, BA '74, Oct. 21, 2017, Adrian, MI

Helen J. (Buckley) Emerson, MLS '75, Sept. 30, 2017, Hickory Corners, MI

John B. Jeffrey, EdD '75, Oct. 16, 2017, Petoskey, MI

David C. Kelleher, BA '75, Sept. 2, 2017, McComb, MS

Stephen J. Kremers, BA '75, Jan. 24, 2017, Virginia Beach, VA

Debra L. (Whipple) Whitaker, BS '79, Oct. 5, 2017, Granger, IN

Faculty

Earl Borr, associate professor emeritus of education and professional development, Nov. 5, 2017, Portage, MI

Rita 'Claire' Callan, associate professor of occupational therapy, Sept. 18, 2017, Kalamazoo

Martin E. Gingerich, professor emeritus of English, Oct. 19, 2017, Kingsley, MI

Meshulam Groper, professor emeritus of mechanical and aeronautical engineering, June 30, 2017, Philadelphia

June Mochizuki, associate professor emerita of counseling, Oct. 29, 2017, Denver

James E. Riley, professor emeritus of mathematics and statistics, Oct. 28, 2017, West Sussex, England

WESTERN MICHIGAN UNIVERSITY

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